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Marie Collins

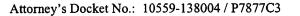
1400.00 OP (Signature) 300.00 DP 02 FC:1504 (Date) ATTORNEY DOCKET NO. FIRST NAMED INVENTOR CONFIRMATION NO. APPLICATION NO. FILING DATE 10559-138004 4222 10/726,757 12/03/2003 Gilbert Wolrich TITLE OF INVENTION: SCRATCHPAD MEMORY ISSUE FEE APPLN. TYPE SMALL ENTITY PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE 02/22/2005 nonprovisional \$1400 \$1700 CLASS-SUBCLASS **EXAMINER** ART UNIT Dinh. Son T. 2824 1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list (1) the 1. Fish & Richardson P.C. CFR 1.363). names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single] Change of correspondence address (or Change of Correspondence firm (having as a member a registered attorney or 2. Address form PTO/SB/122) attached. agent) and the names of up to 2 registered patent] "Fee Address" indication (or "Fee Address" Indication form attorneys or agents. If no name is listed, no name 3. PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer will be printed. Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filling an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE (CITY and STATE OR COUNTRY) Santa Clara, CA **Intel Corporation** [] individual [X] corporation or other private group entity [] government Please check the appropriate assignee category or categories (will not be printed on the patent): 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): [X] Issue Fee [X] A check in the amount of the fee(s) is enclosed. **Publication Fee** Payment by credit card. Form PTO-2038 is attached. Advance Order - # of Copies The Director is hereby authorized to credit any overpayment, to Deposit Account Number 06-1050 (enclose an extra copy of this form). Director of Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. (Authorized Signature) ialoney (Date)

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29,670

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

licant: Gilbert Wolrich et al.

Art Unit:

2824

Serial No.:

10/726,757

Examiner:

Son T. Dinh

Filed

: December 3, 2003

Confirmation No.:

4222

Notice of Allowance Date: November 22, 2004

Title

: SCRATCHPAD MEMORY

MAIL STOP ISSUE FEE

Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450

RESPONSE TO NOTICE OF ALLOWANCE

In response to the Notice of Allowance mailed November 22, 2004, enclosed are a completed issue fee transmittal form PTOL-85b and a check for \$1700 for the required issue fee and publication fee.

Please apply any additional charges or credits to our Deposit Account No. 06-1050.

Respectfully submitted,

Date:

Fish & Richardson P.C. 225 Franklin Street Boston, MA 02110-2804

Telephone: (617) 542-5070 Facsimile: (617) 542-8906

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Denis G. Maloney

Reg. No. 29,670

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